PETITION FOR EVALUATION OF FOREIGN LEGAL EDUCATION

Name:
Address:
Undergraduate Education
Institution:
Address:
Degree received: Date started: Date degree received:
Yes No [] [] Certified, official, final transcript attached [] [] Four-year degree program [] [] Program required "in-residence" classroom attendance If no, explain:
Legal Education
Institution:
Address:
Degree received: Date started: Date degree received:
Yes No [] [] Certified, official, final transcript attached [] [] Three-year degree program [] [] Program required "in-residence" classroom attendance [] [] Course description attached [] [] Law degree obtained in a country whose legal system based upon British common law [] [] Courses were primarily in common-law based subjects If no, explain:

Advanced Legal Education

Institution:	
Address:	
-	
Degree received:	
Date started:	
Date started: Date degree received:	
Yes No	
[] [] Certified, official, final transcript attached	
Dean's letter attached (if required)	
[] [] Program required "in-residence" classroom attendance	
If no, explain:	
Signature:	
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Date:	